NATIONAL COMMUNICABLE DISEASE CENTER

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EPIDEMIOLOGIC NOTES AND REPORTS INFLUENZA — United States

For the week ending January 18, 1969, total mortality and pneumonia-influenza mortality reported from 122 U.S. cities decreased. For this week, total mortality for all causes was 16,439 and the pneumonia-influenza deaths totaled 1,436 (Figure 1). This is the first week to show a decrease in total pneumonia-influenza deaths since excess pneumonia-influenza mortality began 7 weeks ago. The Middle Atlantic and East North Central Divisions have reported a decrease for 2 consecutive weeks while the West North Central, New England, Mountain, and East South Central Divisions showed a decrease for the first time. The Pacific, West South Central, and South Atlantic Divisions continued to report an increase in pneumoniainfluenza mortality. The overall decline in mortality is

CONTENTS Epidemiologic Notes and Reports Influenza - United States..... Outbreak of Infectious Hepatitis - Limestone County, Alabama Clostridium Perfringens Food Poisoning - Texas Staphylococcal Food Poisoning - Waukesha County, Wisconsin..... 21 Transfusion Malaria - Honolulu, Hawaii Surveillance Summary Measles - United States, 1968 Botulism - 1968..... Summary of Reported Cases of Infectious Syphilis International Notes Smallpox - Burma consistent with the survey conducted during the week

ending January 11 which indicated that influenza activity was decreasing in most states (MMWR, Vol. 18, No. 2). (Reported by the Respiratory Diseases Unit, Viral Diseases Section, Epidemiology Program, NCDC.)

TABLE 1. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative totals include revised and delayed reports through previous weeks)

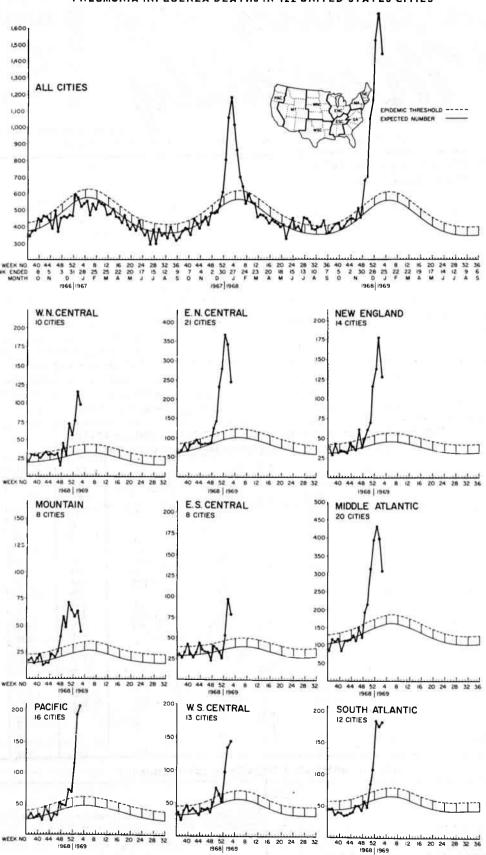
TABLE I. CASES (Cumulative totals	3rd WEE	K ENDED	MEDIAN	CUMULATI	VE, FIRS	MEDIAN
DISEASE	January 18,	January 20,	1964 - 1968	1969	1968	1964 - 1968
Aseptic meningitis Brucellosis Diphtheria Encephalitis, primary: Arthropod-borne & unspecified Encephalitis, post-infectious Hepatitis, serum Hepatitis, infectious Malaria Measles (rubeola) Meningococcal infections, total Civilian Military Mumps Poliomyelitis, total Paralytic Rubella (German measles) Streptococcal sore throat & scarlet fever. Tetanus Tularemia Typhoid fever Typhus, tick-borne (Rky, Mt. spotted fever) Rables in animals	462 10,514 2 - 3	24 -1 18 9 76 823 36 542 82 79 3 5,489 - 610 11,960 2 1 9	29 2 2 19 9 778 5 4,932 69 9,610 2 4 7 67	57 5 7 46 16 256 2,179 102 821 207 201 6 5,723 — 1,022 30,164 5 12 135	77 2 2 2 53 28 179 2,180 112 1,257 191 187 4 13,105 1,363 31,943 2 2 2 16 2 2	28,264 6 12 14 3

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY								
Anthrax: Botulism: Leptospirosis: Calif1, La1 Plague: Psittacosis:	Cum	Rabies in man: Rubella congenital syndrome: Trichinosis: Wis1 Typhus, murine:	- 4 -					

Delayed reports: Typhus, murine: Tex. 1(1968)

Figure 1
PNEUMONIA-INFLUENZA DEATHS IN 122 UNITED STATES CITIES



SURVEILLANCE SUMMARY MEASLES — United States 1968

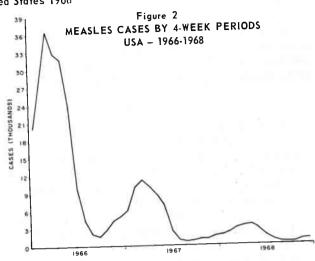
A total of 22,538 cases of measles were reported to NCDC during 1968. This is a reduction of 64 percent from the previous low total of 62,705 cases reported in 1967. Despite the national trend of decreasing case reports in 1968, increased case rates were seen in two geographic divisions, the New England and the Middle Atlantic (Table 1). The gradual change in the seasonal pattern of reported measles cases first noted in 1967 became even more apparent in 1968 (Figure 2).

Table 1
Reported Measles Cases and Case Rate per 100,000
Population by Geographic Divisions
USA - 1966-1968

Geographic		umber o	Cases per 100,000 Population			
Division	1968*	1967	1966	1968	1967	1966
United States	22,538	62,705	204,136	11.3	31.7	104.2
New England	1,351	973	2,643	11.8	8.6	23.5
Middle Atlantic	4,727	2,646	18,702	12.8	7.2	51.0
East North Central	4,261	6,331	69,790	10.8	16.2	180.2
West North Central	488	3,138	9,627	3.0	19.6	60.4
South Atlantic	1,827	7,429	16,437	6.1	25.0	56.5
East South Central	508	5,581	21,021	3.9	42.8	163.0
West South Central	5,381	18,247	27,850	28.0	95.9	148.9
Mountain	1,100	5,092	13,752	13.9	64.8	178.
Pacific	2,895	13,268	24,314	11.3	52.8	98.

^{*}Provisional data

In 1968, the national measles case rate was 11.3 cases per 100,000 population. When the states are grouped according to reported cases per 100,000 population for calendar years 1966, 1967, and 1968, the differences among the resulting frequency distributions are striking (Table 2). In 1968, only 5 (9.6 percent) of the 52 reporting areas showed case rates greater than 25 per 100,000 population. In contrast, the majority of the states, 79 percent and 54 percent in 1966 and 1967, respectively, reported more than



25 cases per 100,000 population. In 1968, almost twothirds (34) of the 52 reporting areas reported fewer than 10 cases per 100,000 population compared with one-third (17) in 1967 and one-tenth (5) in 1966.

Table 2
Frequency Distribution of States* According to Reported
Measles Cases per 100,000 Population
1966-1968

C	Number of States						
Cases per 100,000 population	1968	1967	1966				
Less than 25.0	47	24	11				
25.0 to 49.9	5	13	9				
50.0 to 99.9	-	11	14				
100:0 or greater	0=0	4	18				

^{*}Includes the District of Columbia and New York City.

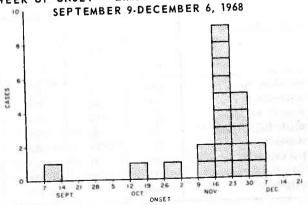
(Reported by the Statistics Section, and the State Services Section, Epidemiology Program, NCDC.)

EPIDEMIOLOGIC NOTES AND REPORTS OUTBREAK OF INFECTIOUS HEPATITIS — Limestone County, Alabama

Between September 9 and December 6, 1968, 21 known cases of infectious hepatitis developed among the students, faculty, and visitors of a rural public school in Limestone County, Alabama (Figure 3). The school which includes grades 1-12 has an enrollment of approximately 750 students. No cases developed in students in grades 3, 4, or 5, but at least one case occurred in each of the remaining grades. The patients ranged in age from 6 to 48 years; 13 were male and eight female. Three of the cases occurred in faculty members, and the remaining adult case occurred in a 24-year-old woman, a resident of another county, 31 days after an isolated, brief visit to the school. The clustering of 18 of the 21 cases during the 3-week period between November 16 and December 6 and the lack of prior histories of blood transfusions, injections, raw shellfish ingestion, or contact with a case of hepatitis suggested a (Continued on page 20)

Figure 3

CASES OF INFECTIOUS HEPATITIS IN A SCHOOL BY WEEK OF ONSET - LIMESTONE COUNTY, ALABAMA



HEPATITIS - (Continued from page 19)

school-centered, common source exposure as the means of acquisition of infections by these persons.

Preliminary investigation of the school's water supply and facilities for sewage disposal have revealed some unsatisfactory conditions which presently implicate the water as the possible vehicle of infection. Other possible factors relating to a common source exposure are currently under investigation.

(Reported by Ira Myers, M.D., State Health Officer, Alabama State Department of Public Health; Betty W. Vaughn, M.D., Tri-County Health Service, Athens, Alabama; and an EIS Officer.)

CLOSTRIDIUM PERFRINGENS FOOD POISONING - Texas

Following an evening meal, an outbreak of food poisoning occurred on October 9, 1968, among personnel stationed at a military base in Texas. Of a total of 900 persons at risk, approximately 500 individuals became ill with moderately severe abdominal cramps and diarrhea, mild nausea, and some vomiting. The mean incubation period was 10½ hours with a range of 5-14 hours (Figure 4). Duration of symptoms was approximately 24 hours.

Food histories implicated mushroom gravy as the vehicle of infection (Table 3). The mushroom gravy was prepared on the day of the outbreak by three food handlers. The gravy consisted of canned mushrooms and a butter roux* prepared from flour, butter, salt, pepper, water, and mushroom juice. The roux and mushrooms were added to the liquid base 3 hours prior to the meal. After cooking, the gravy was placed in a 20-gallon vat and kept warm until serving time. The temperature in the upper part of the vat was 100° F and 140° F at the bottom. Laboratory examination of the foods served at the meal revealed contamination with Clostridium perfringens serotype PS 66, PS 88, in the salisbury steak** and serotype Hobbs type 12 in the mushroom gravy. Both serotypes were isolated from the feces of patients.

(Reported by John A. Robinson, M.D., Chief, Epidemiology Division, U.S.A.F. Epidemiologic Laboratory, and Maurice O. Messer, Military Public Health Division, a military base, Texas; and the Anaerobic Bacteriology Laboratory, Laboratory Program, NCDC.)

- *Cooked mixture of flour and fat.
- **Sample of steak submitted for laboratory analysis had been covered with mushroom gravy.

Figure 4

CLOSTRIDIUM PERFRINGENS FOOD POISONING
AT A MILITARY BASE IN TEXAS

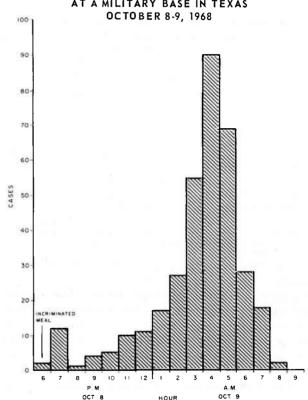


Table 3
Summary of Food History Data
Obtained from Personnel at a Military Base, Texas

	7.0		Oct	ober 1968						
A WA	P		Group A Ate Specified	d Foods	Group B Persons Who Did Not Eat Specified Foods					
Food or Beverage	Not Ill Ill		Total	Attack Rate Percent	111	Not III	Total	Attack Rate Percent		
Salisbury Steak	207	115	322	64	145	13	158	92		
Mushroom Gravy	288	30	318	91	64	98	162	40		
Rissole Potatoes	275	113	388	71	77	15	92	84		
Whole Grain Corn	236	92	328	72	116	36	152	76		
Butter	182	71	253	72	170	57	227	75		
Ice Cream	230	97	327	70	122	31	153	80		
Strawberry Topping	171	77	248	69	181	51	232	78		
Milk	262	61	323	81	91	67	158	58		

STAPHYLOCOCCAL FOOD POISONING - Waukesha County, Wisconsin

An outbreak of food poisoning occurred on November 10, 1968, in Waukesha County, Wisconsin, among customers and employees of a food store. Twenty-eight people were known to have become ill with symptoms characterized by vomiting, diarrhea, and severe prostration; of these, six individuals required hospitalization and an elderly woman died of acute vascular collapse secondary to fulminating gastroenteritis. The incubation period was 1½ to 3 hours.

Food histories implicated baked ham as the vehicle of infection. The food store had received the ham fully cooked from a commercial source. After deboning, the ham was sliced, glazed with pineapple and syrup, sprinkled with spices, and placed in a roaster at 120° F awaiting sale. Cultures of the implicated ham slices, wood block cutting table, and a nasal swab from the food handler who

had prepared the ham were all positive for Staphylococcus aureus phage type 54/75/77. Enterotoxin group A was isolated from the ham slices and the food handler. Similarly cooked, but unopened, unprocessed hams were negative for coagulase positive S. aureus. No cultures were obtained from the slicing machine.

(Reported by Lyle Franzen, M.D., Director, and William C. Steele, R.S., Waukesha County Health Department; Frank Pauls, Ph.D., Assistant Director, and Arlen Helstad, Microbiologist, Wisconsin State Laboratory of Hygiene, and H. Grant Skinner, M.D., State Epidemiologist, Wisconsin Division of Health; Laboratory, Food Industry Associates, Inc., Madison, Wisconsin; and the Epidemiological Services Laboratory Section, Epidemiology Program, NCDC.)

TRANSFUSION MALARIA - Honolulu, Hawaii

On October 17, 1967, a 15-year-old girl in Hawaii underwent open heart surgery and received seven units of whole blood. She was hospitalized again in mid-December 1967 for treatment of a gynecologic abnormality and received five more units of whole blood. In January 1968, she began to experience intermittent febrile episodes, which persisted until mid-April 1968, when Plasmodium malariae parasites were detected on a peripheral blood smear. She was treated with chloroquine and made an uneventful recovery. She had never traveled outside the Hawaiian Islands and had never had malaria previously; she denied use of shared syringes.

The 12 blood donors were all contacted and interviewed; none gave a history of malaria attacks and only two had ever traveled to malarious areas. Sera were obtained from these two donors in September 1968 and analyzed for the presence of malaria antibodies by the indirect fluorescent technique. Only one of the two donors had a positive serology; the dilution end points in his serum were 1:4,096 against *P. malariae*, 1:64 against

P. vivax, and 1:16 against P. falciparum. These results indicate that he had a P. malariae infection. This donor was born in the Philippines in 1911 and emigrated to Hawaii in 1930. He remained in Hawaii except for a visit to the Philippines from December 23, 1966, until January 7, 1967. He denied any history of malaria attacks or unexplained febrile episodes. He had donated his blood on October 16, 1967, and it was given to the patient on October 17. Blood smears were not obtained from this donor before he was treated with chloroquine and primaquine in October 1968.

(Reported by Robert Penington, Jr., M.D., Chief, Epidemiology Branch, Hawaii Department of Health.)

Editorial Note:

The responsible donor in this case may have acquired his infection during his visit to the Philippines in late 1966, but because *P. malariae* infections may persist throughout life, it is also possible that he became infected prior to his emigration from the Philippines in 1930.

SURVEILLANCE SUMMARY BOTULISM - 1968*

In 1968, nine outbreaks of botulism with 10 cases including three deaths were reported to the NCDC. In 1967, only three outbreaks involving six cases and one death occurred. Of the nine outbreaks in 1968, eight were foodborne and one was a case of wound botulism (MMWR, Vol. 17, No. 22). Contaminated vehicles included fish

cured in seal oil and buried underground for 6 months by the Eskimos (MMWR, Vol. 17, No. 19), home-canned chicken soup causing type B botulism, vegetables, fruit preserves, improperly cooked hamburger, and commercially prepared chopped chicken liver causing type A botulism

(Continued on page 22)

BOTULISM - (Continued from page 21)

(MMWR, Vol. 17, No. 48). The incriminated vehicle was unidentified in two outbreaks.

A total of 21 requests for botulism antitoxin or epidemic investigation of suspected outbreaks of botulism were received by NCDC in 1968. On investigation, 12 of these outbreaks were found not to be botulism (Table 4). Of a total of 14 individuals receiving equine Clostridium botulinum antiserum, two suffered adverse hypersentivity reactions.

(Reported by the Enteric Diseases Unit, Special Pathogens Section, Epidemiology Program, and the Anaerobic Bacteriology Laboratory, Bacterial Reference Unit, Laboratory Program, NCDC.)

Table 4
Final Diagnosis of 21 Outbreaks in Which
Botulism Was Initially Suspected — 1968

Final Diagnosis	Number of Outbreaks
Botulism	9
Guillain-Barré syndrome	3
Carbon monoxide poisoning	2
Ate spoiled food - no resultant disease	2
Acute gastroenteritis	
Chemical poisoning	1 =
Probable staphylococcal food poisoning	1
Parasympathetic blockade	
of unknown etiology	1
Acute alcoholic intoxication	1
Laboratory accident - no resultant disease	1

SUMMARY OF REPORTED CASES OF INFECTIOUS SYPHILIS

CASES OF PRIMARY AND SECONDARY SYPHILIS: By Reporting Areas December 1968 and December 1967 - Provisional Data

Reporting Area	Dece	mher		lative -December	B	104.00	ener without	10000000	lative
Reporting Area	1968	1967	1968	1967	Reporting Area	1968	1967		December
ANTI PRIGITATION		-	1000000					1968	
NEW ENGLAND	24	38	341	358	EAST SOUTH CENTRAL	88	119	1,344	1,715
Maine	-	-	5	- 4	Kentucky		19	116	181
New Hampshire	-	-	4	9	Tennessee	24	24	317	304
Vermont	1	2.	1	5	Alabama	33	50	541	882
Massachusetts	12	22	214	210	Mississippi	27	26	370	348
Rhode Island	5	4	32	36	The state of the same of the same of				
Connecticut	6	10	85	94	WEST SOUTH CENTRAL	263	256	3,491	3,206
The second second second					Arkansas	6	9	118	129
MIDDLE ATLANTIC	271	305	3,416	3,597	Louisiana	54	60	823	675
Upstate New York	29	19	332	309	Oklahoma	6	5	80	111
New York City	1.60	160	2,167	2,086	Texas	197	182	2,470	2,291
Pa. (Excl. Phila.)	17	31	221	265		_		1,470	-,
Philadelphia	22	34	239	337	MOUNTAIN	54	25	498	566
New Jersey	43	61	457	600	Montana.	1	3	476	300
		0.1	437	800	Idaho	2	1	-	
EAST NORTH CENTRAL	168	284	0.701		Wyoming	-	1	5	17
Ohio	33	59	2,791	3,261	Colorado	1	3	4	13
Indiana	21		452	637				21	60
Downstate Illinois	12	28	348	202	New Mexico	17	- 6	168	174
		13	208	149	Arizona	30	11	246	262
Chicago	57	82	975	989	Utah		-	9	8
Michigan	45	102	783	1,258	Nevada	3	-	39	23
Wisconsin	-	-	25	26			1		
Add to the control of the control of		52991	1000		PACIFIC	159	106	1,857	1,744
WEST NORTH CENTRAL	20	34	386	383	Washington	ц	4	46	60
Minnesota	5	8	56	63	Oregon	1	1	40	42
Iowa	7	5	47	45	California	153	101	1,761	1,631
Missouri	10	16	193	143	Alaska	1	-	1 3	3
North Dakota	-	-	5	4	Hawaii		-	7	
South Dakota	2	2	32	37				P 25.1	
Nebraska	1	2	23	38	U. S. TOTAL	1,326	1.659	19.093	21.053
Kansas	2	1	30	53					_
					TERRITORIES	76	91	1,113	971
SOUTH ATLANTIC	279	492	4.969	6,223	Puerto Rico	76	90	1,065	934
Delaware	8	4	40	71	Virgin Islands		1	48	37
Maryland	37	43	473	613					1
District of Columbia	49	63	614	800			_		•
Virginia	15	23	293	293					
West Virginia		1	31	293					
North Carolina	17	41	538	745	Note: Cumulative Total	taclud.	. revised	and dalass	od ======
South Carolina	29	41	499		through previous		FEATRED	-ist deray	- report
Georgia	59	76		777	cincugn previous	montens.			
Florida	65	200	887	968					

INTERNATIONAL NOTES SMALLPOX - Burma¹

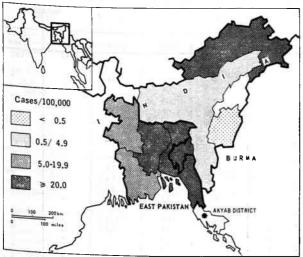
In the Akyab District, Burma, between January 1968 when smallpox was introduced from Pakistan, and August 17, a total of 181 cases with 32 deaths were reported (Figure 5). Only sporadic cases were reported between

January and April. Then the incidence increased sharply and reached an epidemic peak in June when 78 cases were reported (Table 5). Of the 181 cases, 168 (93 percent) were in children under 15 years of age; 25 cases (14 percent) were

[•] Provisional data

Figure 5

SMALLPOX CASE RATES PER 100,000 POPULATION
IN THE ENDEMIC AREAS OF INDIA AND PAKISTAN
NEAR BURMA - 1968



^{*}Area of outbreaks in Burma.

in children under 1 year of age, and the case fatality rate in this group was 44 percent. For all the cases, the case fatality rate was 20 percent. All but two persons who died were examined for vaccination scars and none showed primary vaccination scars. Of the persons who recovered from smallpox, 144 were examined for vaccination scars and only eight had primary vaccination scars.

(Reported by the Smallpox Eradication Program, NCDC.)

Since September 1968, A2/Hong Kong/68 influenza

activity has been reported from the following countries:

Table 5
Smallpox Cases by Month of Onset,
Akyab District, Burma,
January—August 1968

Month of Onset	Number of Cases
January	15
February	4
March	4
April	23
May	39
June	78
July	14
August	4
Total	181

Editorial Note:

The Akyab District lies at the southwestern tip of Burma, adjacent to high incidence areas for smallpox in East Pakistan and near the border of India. Free movement of the population is known to occur between the Akyab District and the smallpox endemic areas in East Pakistan. Burma became free of endemic smallpox over 2 years ago. Smallpox continued to occur in the adjacent areas of East Pakistan which increased the likelihood that Burma would become re-infected with smallpox. This epidemic illustrates the need for continuing surveillance and containment programs in countries fordering endemic areas.

Reference:

INFLUENZA - 1968 and 1969

Bernuda (information dated January 4, 1969) — During December many cases of influenza-like illness and 60 confirmed cases of A2/Hong Kong/68 were reported.

Canada (report received January 20, 1969) — Scattered outbreaks of influenza-like illness were reported in most parts of Canada. Elevated school and/or industrial absenteeism was reported from the provinces of Quebec, Ontario, and British Columbia. Reported pneumonia-influenza deaths in Montreal between December 22, 1968, and January 11, 1969, exceeded the number reported for the same period last year. A2/Hong Kong/68 influenza has been documented in all provinces except Newfoundland, Prince Edward Island, and New Brunswick. Two influenza B isolations were obtained in Manitoba.

Canal Zone (information dated November 5) — Four influenza isolates were identified as antigenically similar to A2/Hong Kong/68, and three paired sera had diagnostic rises in hemagglutination inhibiting antibody titers to A2/Hong Kong/68. Epidemiologic information on the extent of associated respiratory disease was not available.

Federal Republic of Germany (information dated January 8, 1969) - From December 21-28, 16 cases of influenzalike illness occurred in a military unit in Brake on Weser (Niedersachsen) following the return of one soldier from the United States. The disease was reported as clinically mild. Five strains of a virus antigenically identical to the A2/Hong Kong/68 virus were subsequently isolated. Iceland (information dated December 20) - Sporadic influenza cases associated with a virus antigenically similar to A2/Hong Kong/68 occurred in Reykjavik, but as of December 20, no extensive epidemic had occurred. Japan - From September 30-November 8, 10 school outbreaks of influenza were reported in children 8-12 years old. Seven of these outbreaks occurred in the southern half of the country in the Prefectures of Tokyo, Kanagawa, and Osaka and were associated with A2/Hong Kong/68. The remaining three outbreaks occurred in the Prefectures of Aomori and Kanagawa and were associated with influenza B.

Netherlands (information dated January 3) - During the 2 weeks prior to January 3, 1969, rapid spread of influenza occurred in the Netherlands. The disease was

(Continued on page 28)

¹World Health Organization Weekly Epidemiological Record, 43(50):650-651.

Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

JANUARY 18, 1969 AND JANUARY 20, 1968 (3rd WEEK)

	ASEPTIC			[3]	ENCEPHALIT	IS	المازي	EPATITIS	1,900		_
AREA	MENIN- GITIS	BRUCEL- LOSIS	DIPHTHERIA		including cases	Post- Infectious	Serum	Infed	tious	MALA	RIA
	1969	1969	1969	1969	1968	1969	1969	1969	1968	1969	Cum 196
UNITED STATES	25	5	3	20	18	10	84	830	823	31	102
IEU ENGLAND	_	_	1	-	2	=× 1=	6	E 2	1.6		,
IEW ENGLAND Maine	_	_	1 -		_		-	53	46	_	4
New Hampshire	_	_	_	_	1	_ [_	_	-	7.1	
Vermont	_	-	_	7.	_		_	-	C	_	_
Massachusetts	- 1	-	1		-	- 1	-	30	13		4
Rhode Island	- 1	-	-	-	-	-	1	15	8	- "	-
Connecticut	-	-	-		1	-	5	8	23	-	-
IIDDLE ATLANTIC	4	_	_	3	4	_ {	33	153	122	2	_ = 2
New York City	1	_	_	2	-		21	59	51	2	
New York, Up-State.	2	_ =	_	1	_	1 - 1	7	18	24	1	
New Jersey.*	1	- "	-	0.0	_		3	43	14	î	1
Pennsylvania	-	-	- 11	-	4	- 1	2	33	33	- 1	
ACT NORTH CENTRAL	4	_	201	8	3	2		166	150	_	
AST NORTH CENTRAL	-		1	4	1	2	4 2	166 58	153 58	2	5 1
Indiana		_ ^	10 -	-	-		-	8	3		
Illinois	_	_		1	-	2	_	19	34		
Michigan	4	-		3	2	_ 1	2	53	42	1	
Wisconsin.	-	- :	1		-	-	-	28	16		
EST NORTH CENTRAL	1	2			_		_	45	54	ء ا	
Minnesota	-	_	_	0 11 0			b - I	45 10	56 19	3	
Iowa					_	-	_	12	9		
Missouri	1		- 117		-	_	_	6	16		
North Dakota	_	_	-	_	-	_	_	_	4		
South Dakota		1		_	_		-	2]	_	
Nebraska		1		-	_	-	-	6	2	_	
Kansas *			-	-	-		-	9	6	3	
			i			7.1					
OUTH ATLANTIC	2	3	-	2	3	3	2	66	69	7	2
Delaware	2			12.		;	-	1	1 .7	-	
Maryland	-	_			_	1 -	-	6 1	14 1	-	
Virginia	- 1	2	I -	[]	1	_ 1	_	7	18		
West Virginia	_	_					_	8	4	_ [
North Carolina	-	-	- "	2	_		_	5	4	3	19
South Carolina	-	-	-	-	-	1	-	1	1 i i	2	-(
Georgia	-	1		1000			- L	14	13	2	
Florida			-	-	2	1 -	2	23	14		•
AST SOUTH CENTRAL		_	_		_	- 1	1	63	63	1	
Kentucky		_		<u> </u>	_		1	35	29		
Tennessee		-	_	-		1		15	18		-
Alabama	-	_	-107	v -				8	9	1	
Mississippi	-	-	-	-	- "		- 0	5	7	-	
CT COURT CENTRAL	1	-									
ST SOUTH CENTRAL	_		1	-	2		_	72 7	69	3	
Louisiana					5	N 10		24	2 11	2	
Oklahoma. *	-			_	2			6	18		
Texas	1	-	1		-	-	_	35	38		
NING TA	_										
DUNTAIN				1	1	- 1	- :-	34	27	1	
MontanaIdaho				1 1			-	4	7	-	
Wyoming		_		1 1	_ [76.11	4 .1	3	9		
Colorado.*	-		_	_	1	-		_	1	1	
New Mexico	_	-					100	2	2	_ 1	
Arizona	-		-		-	- 1 - 1 h	-	6	5		
Utah	-	-	-	- 1	-	-	-	19	2	_	
Nevada	-	-	-		-	-	-	-	-	-	
CIRIC	13	_	7			,	20			1171	
CIFIC	13			6	3	4	38	178	218	12	4
Washington.*	- 1	_	1 [- 1		-	7	16	-	
California.	9			6	3	4	38	16	16	10	
Alaska.*				-	3	4	38	155	184 2	12	37
Hawaii	3		1		_			-	-		
CONTRACTOR OF THE PROPERTY OF										_	•

*Delayed reports: Brucellosis: Alaska 1(1968)
Diphtheria: Colo. 1(1968)

Encephalitis, primary: D.C. 1(1968)
Hepatitis, serum: N.J. delete 3(1968), Wash. 1(1969)
Hepatitis, infectious: N.J. delete 12(1968), Kans. 5(1968), Okla. 4(1968), Wash. 7(1969)
Malaria: Kans. 1(1968), Ark. 1(1968)

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

JANUARY 18, 1969 AND JANUARY 20, 1968 (3rd WEEK) CONTINUED

			10, 1707 711								
ADD TO SERVICE OF THE	MEA	SLES (Rube	ola)	MENINGO	COCCAL INF	ECTIONS,	MUMPS	P	OLIOMYELIT	ris	RUBELLA
AREA		Cumul	ative		Cumul	ative		Total	Para	lytic	
	1969	1969	1968	1969	1969	1968	1969	1969	1969	Cum. 1969	1969
UNITED STATES	352	821	1,257	87	207	191	2,456	-	-	-	462
,			1,23,		207	-/-	-, .50				102
NEW ENGLAND	8	26	41	7	10	7	368	-	i -	-	37
Maine.* New Hampshire	-	2	7	-	-	-	36	-		-	2
ermont *	-		_	<u> </u>	_	-	13		-	<u>-</u>	5
riassachusette w	5	11	18	2	3	3	7 147	[[1 11
Milode Island	-			ī	2		79	-	-	-	
Connecticut	3	13	16	4	5	4	86	-	-	-	18
MIDDLE ATLANTIC	93	247	165	9	31	24	96	_	_	_	16
New York City	67	145	24	2	3	24	42	[_		16 9
new fork, IIn-cease	6	29	106	3	9		NN	-	_	-	á
New Jersey	8	30	29	3	13	8	54	l -		-	4
Pennsylvania	12	43	6	1	6	13	NN	-	- =	-	
EAST NORTH CENTRAL				!					ļ.		
OHILO	47 5	85 7	360 65	16 3	30 6	2 7 8	748 55	-		-	105
-uu rana.	17	26	75	2	2	3	96	-		[25 16
illnois.	1	6	130	3	5	4	150		_	_	8
"ILCHIQAN.	8	10	20	7	15	11	94	-	-	-	36
"Isconsin	16	36	70	1	2	1	353	-		-	20
WEST NORTH CENTRAL	11] _ [.,	, ,					
	11	65	36	8 1	16 4	15 1	212 31		-	-	86
TOWA.	5	12	13		-	1	157		1 [1 56
······································	-	39	1	3	7	4	157	_	_	[21
Mortin Dakota	-	-	14		-	i	8	-	_ "	-	1
South Dakota Nebraska	-	-	2	-	-	2	NN	-	-	-	-
Kansas *	6	14	3	1	2	1	11		-	-	-
	-	- '	3	3	3	5	-	(2)	-	-	7
SOUTH ATLANTIC	101	166	106	21	43	46	127	_		_	53
-claware.	-	-	-	1	3	-	127	_			20
	-	-	8	2	5	1	16		-	_	2
Dist. of Columbia.* Virginia. West Vincia	-	- 1	-	-	-	1			-	-	-
	6	24	16	3	3	4	20			-	3
	5	16	34	1	2	2	40	-	-		16
	1	5 13	2 2	2 1	4 5	8 8	NN 30		-	-	2
	_	13	_	7	10	5	30	_			-
Florida	89	108	44	4	11	17	21	_	I 1	_	10
EAST SOUTH CENTRAL						-			100		
	7	9	33	1	6	6	74	-	-	-	23
	2	2	4	1	2	2	29	-	-	_	8
	1 2 6	2 -	15 11	<u>-</u>	4	4	33	-	-	-	14
Mississippi	5	5	3		_	-	6	-		_	1
WEST SOUTH OF			_						_ [_	1
WEST SOUTH CENTRAL	60	144	241	5	20	40	225				34
Arkansas. Louisiana. Oklahoma *	-		T -	-	-	1	-		-	-	- 1
Oklahoma *		-	1	3	8	9	-		-	-	-
Texas	60	1 1/2	34	- 2	1	10	-	-	-	-	3
MOUNTA	00	143	206	2	11	20	225	-		-	31
MOUNTAIN	7	31	52	2	10	2	221	-	_ [l <u>-</u>	37
Montana. Idaho	-	- 1	1		_	1	53	-	-	_]]
Wyomine	-	-	6	1	2	-	27	-	- 1	-	5
	-	- 1	13	-	-	-	-	-	-	-	-
	2 1	2	15	-	-		39	-		-	20
Arizona *	4	8 21	6 11	1	2 3	1	64	-	-	-	2
Utah Nevada	-	- 1	-		1	1	35 3			100 2	9
	-	_		-	2	-	3				1
PACIFIC	-		_								
Washington*	18	48	223	18	41	24	385		- 1	-	71
Oregon	8	2	66	1 1	2	2	107	-	-	- x	25
California	10	17 28	58 8 7	1 16	1 36	1 21	18 257			-	8
	-	1	-	10	30	-	1			-	34
***************************************			12		2	_	2	-	-	-	4
Puerto Rico											
*Delayed reports: M	7	20	9	-	-	-		-	-		1

Measles: Me. 2(1969), Vt. 1(1968), Mass. delete 2(1968), N.Y.Ups. 16(1968), Minn. delete 9(1969), Ariz. 3(1969)

Meningococcal infections: N.J. 1(1969), D.C. 2(1968), Okla. 1(1968)

Mumps: Me. 12(1969), N.J. 17(1968), Kans. 2(1968), D.C. 6(1968), Ariz. 31(1969), Wash. 135(1969)

Rubella: Me. 1(1969), N.J. 1(1968), Kans. 1(1968), Wash. 19(1969)

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

JANUARY 18, 1969 AND JANUARY 20, 1968 (3rd WEEK) CONTINUED

AREA	STREPTOCOCCAL SORE THROAT & SCARLET FEVER	TET	ANUS	TULA	REMIA	TYPI FEV		TICK	S FEVER -BORNE . Spotted)		IES IN IMALS
	1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969
UNITED STATES	10,514	2	5	-	5	3	12	-	1	52	135
NEW ENGLAND	1,419	100	1	-	_		_	- 20	ar _n n'	. 10	1
Maine *	37	_	- 1	-		-	-	7.	3 - 2	i	ı î
New Hampshire *	41	-	-	-	-	-	_		- 50	-	-
Vermont	1	-	-	-	-	-		- *	- Ja 5	. "- 1	
Massachusetts	194	-	-	-	-	-	-	III , , , 10	~ -	25 - X	
Rhode Island	85		_	-	- '	-	-				
Connecticut	1,061		1	-	-	-	-	-		18.	
IDDLE ATLANTIC	359		-	-	_	1	2	H .	15-16	_	
New York City	15	-	-	-	-	1	1	-		_	
New York, Up-State.	331	-	-	-	-	-	1	-	30 To	_	
New Jersey	. NN	-			-	-	-			-	100
Pennsylvania	13	-	-	-	-	-	-	-0		-	
EAST NORTH CENTRAL	914	1	2		_	_				. 3	
Ohio	271	_	-	-	-	_	-		100		51
Indiana	205	-	F	-	-	-	-		-,	. 3	
Illinois	148	1	1	-	-	- 1	- 7			-	
Michigan	181	-	1	- 1	-1	-			-	-	
Wisconsin	109	- "	-	-	-	-1	-	-	*	21:	
WEST NORTH CENTRAL	402	_	- 1	_	1	-	_	_	271	9	1
Minnesota *	41	_W	- 1	_	-	_	_		_	1	3
Iowa.	170	-		-	-	-	-	-	-	4	
Missouri	-	-	-	- 1	1		- 1	-		3	
North Dakota	76		-	- 1	-	-	-	-		_	
South Dakota	24	-	-	-	- :	-	-		- :	-	
Nebraska	9	-	-	-	-	-	-	-	- 1	-	
Kansas *	82	_	•	-	-	- 1	-	-	-	1	
SOUTH ATLANTIC	932	1	1	1	1	1	2	-	1	18	4
Delaware	21	-	-	-	-	-	-	-	-	-	
Maryland	192	-	-		-	-	-	-		-	
Dist. of Columbia.*	1	1	1	- 1		-	-	-	- 1	-	
Virginia	187	- 5	-	1 4				-		13	3
West Virginia	153 14				1	1	1		- 1	2	
North Carolina South Carolina	140	_			_	- 1	1				
Georgia	17	_		2 1		1	1			1	1.5
Florida	207	-	-		-	-			-	2	
A CONTRACTOR AND A CONT	1 100										
EAST SOUTH CENTRAL	1,499 140			7.	2	-	1	-	1	8	2
Kentucky Tennessee	1,213	1 12	0.1	1	2		1		1 1	7	1
Alabama *	8	1	1 1	1 1	_		<u> </u>		1 1	-1	
Mississippi	138		-	-	-	-	- 1		-	1 .	
		30.0					e i e		100		
JEST SOUTH CENTRAL	935					-	3	-	-	5	1
Arkansas	11 2			1	. 1	-	3	-			
LouisianaOklahoma	79	il a		7	1		- I				
Texas	843	-35	_		2	-	EL.	h.l.		5	1
			1 1								
10UNTAIN	2,595	-100			1	1	2	-		1	
Montana	37		1	1 1	-	9	-		-	-	
Idaho	156 619			1	_]					1	
Colorado *	1,359		1	- 1	5 3 1		1	1 2 1		1	117.15
New Mexico	202		_		1	- 3					
Arizona.	94		-	-	_					_	- 3
Utah	128	-	-	-	-	'	- 1	-	' - i		-50
Nevada	- 0	-	-	•	-	1	1		· - []		
PACIFIC	1,459	- 2	2	1 - 1			2	96.	4_4	7	-10
Washington*	553	BILL	- 1			- 1		-	- 1	- 7+	1
Oregon	85	7 (4)	-	-			S I		1 6	-	100
California	752	1	2	c - 1	-	-	2	774	V - 1	7	1
Alaska	.5	-	1	5 - 1	-				- 1		1/20
Hawaii	÷ 64								JL - JL		
								4			

*Delayed reports: SST: Me. 5(1969), N.H. 21(1968 22(1969), Kans. 92(1968), D.C. 3(1968), Ariz. 11(1969), Wash. 639(1969)
Typhoid fever: Ala. delete 1(1968), Colo. 1(1969)
Rabies in animals: Minn. 1(1968), Ark. 1(1968)

Week No.

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED JANUARY 18, 1969

the second secon	A11 C	auses	Pneumonia	Under		A11 C	auses	Pneumonia	Unde
Area	All Ages	65 years and over	and Influenza All Ages	l year All Causes	Area	All Ages	65 years and over	and Influenza All Ages	l yea All Cause
NEW ENGLAND:	924	568	128	38	COURTY ART AND CO.	1 527	706	101	
Boston, Mass	344	192	49	15	SOUTH ATLANTIC:	1,537 102	796	181	81
bridgeport, Conn	56	36	11	4	Atlanta, Ga Baltimore, Md		48	20	15
Cambridge, Mass	35	23	11	i		320	158		
rall River, Mass	37	27	5	i	Charlotte, N. C	69 84	33	18	3
nartford, Conn.	61	36	8	2	Jacksonville, Fla Miami, Fla	135	53 66	10	. 3
Lowell, Mass.	32	22	7	ī	Norfolk, Va	83	47	13	2
Lynn, Mass	26	18	2	î	Richmond, Va	131	67	13	
New Bedford, Mass	45	27	ĩ	3	Savannah, Ga	68	28	11	17
Haven, Conn	37	20	2	4		104	85	1	
Providence, R. T	77	51	6	5	St. Petersburg, Fla Tampa, Fla	90	48	24 31	1
somerville, Mass	13	11			Washington, D. C	288	129	18	19
opringfield, Mass	61	37	11	_	Wilmington, Del	63	34	5	
"aterbury, Conn	37	19	1		willington, bel.	0.5	34	,	5
Worcester, Mass	63	49	14	1	EAST SOUTH CENTRAL:	882	479	78	20
	05	'	-7	. 1	Birmingham, Ala	141			
IDDLE ATLANTIC:	3,984	2,330	308	144	Chattanooga, Tenn		70	5	4
Albany, N. Y	51	24	2	2	Knoxville, Tenn	67 74	35	10	3
Allentown, Pa	45	29	10	_	Louisville, Ky		51	10	1
Buffalo, N. Y	176	108	3	3	Memphis, Tenn	178 201	106	15	1
Camden, N. J	53	33	7	2			112	11	4
Elizabeth, N. J	24	16	_	-	Mobile, Ala Montgoery, Ala	52 56	19	2	5
trie, Pa	58	34	9	1	Nashville, Tenn	56	35	13	Tarre
Jersey City, N. 7	79	53	10	3	Mashville, lenn.	113	51	12	2
Mewark, N. J	103	64	6	3	WEST SOUTH CENTRAL:	1 576	005	1/0	
new York City, N V	1,876	1,081	120	81	Austin, Tex	1,576	805	143	139
Taterson, N. I	40	20	5	2	Baton Rouge, La	55	31	15	4
rulladelphia, Pa	680	391	33	18	Corpus Christi, Tex	43	22	6	5
rittsburgh, Pa	249	127	40	11	Dallas, Tex	36	24	2	5
Meauing, Pa	60	47	5	1	El Paso, Tex	187	90	15	14
Mochester, N. Y	153	104	31	7	Fort Worth, Tex	69	34	11	6
schenectady, N. V	31	20	4	<u>′</u>	Houston, Tex.	96	57	5	5
Stranton, Pa	49	30	1	1	Little Rock, Ark	323	119	12	67
Syracuse, N. Y.	84	45	5	5		94	48	12	5
renton, N. J.	89	45	9	3	New Orleans, La	225	107	15	11
utica, N. y.	44	31	5		Oklahoma City, Okla	97	57	4	1
Yonkers, N. Y	40	28	3		San Antonio, Tex	168	103	20	6
	40	20	,	1	Shreveport, La Tulsa, Okla	92	58	11	5
AST NORTH CENTRAL:	3,323	1,873	244	172	Idisa, Okia.	91	55	15	5
akron, Ohio	84	53	3	5	MOUNTAIN:	HDC car HI	0.0		
Cauton, Ohio	34	19	1	2	Albuquerque, N. Mex	575	348	44	30
Curcago, Ill.	907	471	44	51	Colorado Springs, Colo	54	24	5	2
orncinnati. Obio	222	124	18	8	Denver, Colo	32	16	7	5
oreverand, Objoss	256	135	14	11	Ogden, Utah	132	82	9	5
Columbus, Objection	143	77	11	6	Phoenix, Ariz	21	15	1	1
Dayron, Ohio	100	62	2	5	Pueblo, Colo	148	86	5	11
Secrost, Mich sesses	402	245	23	14	Salt Lake City, Utah	36	28	5	2
Evansville Ind	61	39	9	5	Tucson, Ariz	71	46	6	2
" Alle, Mich	68	35		7	Ideaon, Aliz.	81	51	6	2
Wayne, Ind	73	41	15 10	2	PACIFIC:	0.505			
oury, ind	49				Berkeley, Calif	2,535	1,554	211	102
Wanide Mich	73	24 44	9 10	6	Fresno, Calif	23	13	14-11	
and anapolis Ind	190			6	Glendale, Calif	69	43	7	5
		111	10	10	Honolulu, Hawaii	60	43	5	3
	60 183	25	9	5		51	26	5	4
Totala, III	183 57	113	10	11	Long Beach, Calif	127	69	8	3
MUCKFORD, TII		33	7	5	Los Angeles, Calif	919	569	81	39
Bend. Ind	41 53	26	8	3	Oakland, Calif	130	69	5	14
toredo, Ohio	53 140	32	9	3	Pasadena, Calif	36	31	3	-
Youngstown, Ohio	149	98	13	4	Portland, Oreg	241	150	15	12
	118	66	9	3	Sacramento, Calif	86	58	4	1
ST NORTH CENTRAL:	1 102	670	00	, ,	San Diego, Calif	181	98	28	6
MOIDES TOWN	1,103	670	99	47	San Francisco, Calif	249	150	16	7
-uzuln, Minn	90 40	54	7	9	San Jose, Calif	80	51	8	1
Mana *	40	27	2	-	Seattle, Wash	152	94	14	4
Kansas City, Mo	54 166	29	10	5	Spokane, Wash	73	50	9	2
Lincoln, Nebr.	166	108	2	5	Tacoma, Wash	58	40	3	1
Minneapolis, Minn	33	24	6	1	m.s.1	16 420	0 400	1 436	777
Omaha, Nebr.	150	94	7	8	Total	16,439	9,423	1,436	773
St. Louis, Mo	88	54	5	3		1			
St. Paul Ma	326	184	40	9		nulative T			
St. Paul, Minn Wichita, Kans	75 81	49 47	8 12	3 4	including report All Causes, All Ages		_		
new			isional to		All Causes, All Ages All Causes, Age 65 and Pneumonia and Influenza	over		29,37	7

INFLUENZA - (Continued from page 23)

reported as clinically mild although some deaths had occurred. All isolated virus strains were antigenically similar to $A2/Hong\ Kong/68$.

Romania (information dated December 20) — Sporadic cases of influenza-like disease occurred in Bucharest in November and December 1968. Two strains of a virus antigenically similar to A2/Hong Kong/68 were isolated. Spain — During the first week of January, 125 cases of clinical influenza occurred at a Naval Base in Rota, Spain. Approximately 30 percent of these patients had received polyvalent vaccine in October. Laboratory documentation is pending.

Sweden (information dated December 22, 1968, and January 7, 1969) — Scattered cases and small clusters of influenza-like disease have been reported from central and western Sweden. Most of the cases occurred in persons or close contacts of people going to Sweden by flights from the United States. Throat washings from patients in Gothenburg and the provinces of Dalarna, Småland, and Västmanland have yielded 13 A2/Hong Kong/68-like isolates.

Thailand (information dated November 1) — Since September 1968, 1,682 cases of influenza-like disease involving all age groups were recorded in hospitals and health centers in Bangkok and Thonburi. As of November 1, 23 strains of A2 influenza virus had been isolated; all 23 were antigenically similar to A2/Hong Kong/68.

United Kingdom (information dated January 4) — Sporadic influenza cases associated with a virus antigenically similar to A2/Hong Kong/68 were reported from several areas in England. Of the 21 strains of the virus isolated, 15 were from people who had returned from the United States.

On December 21, a localized outbreak of influenzalike disease occurred in a boy's school in Oxford. Five strains of an A2/Hong Kong/68-like virus were isolated.

(Compiled from WHO Epidemiological Record, Vol. 43, Nos. 44-48, and 51/52 and Vol. 44, No. 2 or reported by the Virus Unit, WHO Influenza Program, Geneva; S.E. Acres, Epidemiology Division, Department of National Health and Welfare, Canada; Dr. S.M. Frazer, Chief, Medical Officer, Pan American Sanitary Bureau; and Dr. Stephen Kendra, Head, Communicable Disease Branch, Preventive Medical Division, Bureau of Medicine and Surgery, Navy Department, Washington, D.C.)

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IN ADDITION TO THE ESTABLISHED PROCEDURES FOR REPORTING MORBIDITY AND MORTALITY, THE NATIONAL COMMUNICABLE DISEASE CENTER WELCOMES ACCOUNTS OF INTERESTING OUTBREAKS OR CASE INVESTIGATIONS WHICH ARE OF CURRENT INTEREST TO HEALTH OFFICIALS AND WHICH ARE DIRECTLY RELATED TO THE CONTROL OF COMMUNICABLE DISEASES. SUCH COMMUNICATIONS SHOULD' BE ADDRESSED TO:

NATIONAL COMMUNICABLE DISEASE CENTER ATLANTA, GEORGIA 30333 ATTN: THE EDITOR MORBIDITY AND MORTALITY WEEKLY REPORT

NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE NCDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES AT CLOSE OF BUSINESS ON FRIDAY; COMPILED DATA ON A NATIONAL BASIS ARE OFFICIALLY RELEASED TO THE PUBLIC ON THE SUCCEEDING FRIDAY.

MRS. NORA MAGENNIS 81 OCC 10 66 AEDES AEGYPTI ERAD. BR. HEALTH, EDUCATION, AND WELFARE
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